

CLAIMS ONLY

SERIAL NO. _____ FILING DATE _____

APPLICANT(S) _____

CLAIMS

	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT			*		*		*	
	IND.	DEP.	IND.	DEP.	IND.	DEP.		IND.	DEP.	IND.	DEP.	IND.	DEP.
1	1												
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TOTAL IND.	2	↓		↓		↓							
TOTAL DEP.	11	←		←		←							
TOTAL CLAIMS	23												
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TOTAL IND.		↓		↓		↓							
TOTAL DEP.		←		←		←							
TOTAL CLAIMS													

* MAY BE USED FOR ADDITIONAL CLAIMS OR ADMENDMENTS